



# APPLICATION TO AUTOMATICALLY RECEIVE ABSENTEE BALLOT APPLICATIONS

**Mark all that apply:**

- I have a MN issued drivers' license or MN ID card number: \_\_\_\_\_
- I have a Social Security Number. The last four digits are: XXX-XX- \_\_\_\_\_
- I do not have a MN issued drivers' license, MN-issued ID card or a Social Security Number. *Your identification number will be compared to the one on your absentee ballot envelope.*

**Name (please print):** \_\_\_\_\_

**My legal residence address is:**

Street or Route Number \_\_\_\_\_ Apartment Number and/or PO Box Number \_\_\_\_\_

City  Township (check whichever is applicable) \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Telephone Number (optional) \_\_\_\_\_

Email address: \_\_\_\_\_

**Mail address for application (if different):**

Street or Route Number \_\_\_\_\_ Apartment Number and/or PO Box Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

*I certify that I reasonably expect to be permanently unable to vote in person at the polling place for my precinct due to illness or disability and hereby request that an application for absentee ballots be sent to me before each election in which I am eligible to vote,*

**X**

\_\_\_\_\_  
Date Legal Signature

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Registered: Yes or No

Precinct: \_\_\_\_\_

**See other side for special instructions for voters with disabilities or power of attorney**

**Return this application as soon as possible to:**

McLeod County Auditor-Treasurer  
Cindy Schultz  
2391 Hennepin Ave. N.  
Glencoe, MN 55336

Telephone No. 320-864-1203  
Fax No. 320-864-3268

[mcleod.auditor-treasurer@co.mcleod.mn.us](mailto:mcleod.auditor-treasurer@co.mcleod.mn.us)  
[www.co.mcleod.mn.us](http://www.co.mcleod.mn.us)

**Where to return application**

You should return this to your local election office. If not provided above, contact information for your local election official can be found under "Election Official Directory" at <http://www.sos.state.mn.us>.

**Information for active-duty military and overseas voter:**

If you are applying to receive absentee ballot applications because you or your family are active-duty military or because you will be overseas and/or outside of the territorial limits of the United States, do not use this application. You are entitled to special protections if you apply using the Federal Postcard Application. For more information; go to <https://minnesota.overseasvotefoundation.org>

**Options for returning this application**

This application may be returned by mail, fax or as a scanned attachment to an email.

**Confidentiality Notice:**

Data on this form is public data, except for your date of birth, driver license or state ID number and the last four digits of your Social Security Number. This non-public information is optional. Failure to provide this information may prevent you from receiving an absentee ballot application for each election.

**Options available to you if you have a disability:**

You may:

- Sign the application yourself,
- Make your mark, or
- Ask another person to sign for you in your presence (have the person sign their own name as well).

If you have adopted the use of a signature stamp for all purposes of signature, you may use your signature stamp or ask another person to use your signature stamp in your presence. See *Minnesota Statutes*, section 645.44, subdivision 14.

**Information regarding Power of Attorney**

Voting is not covered by power of attorney. A power of attorney pertains only to affairs affecting property. A person with power of attorney may only sign for you in your presence, as outlined above. See *Minnesota Statutes*, section 523.24, subdivision 14.